Public Health
Seattle & King County

HEALTHY PEOPLE. HEALTHY COMMUNITIES.

Alonzo L. Plough, Ph.D., MPH, *Director and Health Officer*

February 10, 2004

Dear Sir/Madam:

As members of the Station 31 Medical Testing Advisory Panel, we have reviewed the Fire Station 31 Hazardous Materials Testing final report from Prezant Associates, Inc. Prezant conducted extensive testing for a variety of airborne, surface and soil health hazards at Station 31.

Overall, we are reassured by the results. We believe there is little risk to Station 31 members due to harmful levels of carcinogens or other significant health hazards currently present at Station 31. However, there are two areas covered in the report where we would like to comment further.

Lead

A few specific areas of the building were found to contain lead above Environmental Protection Agency (EPA) levels. The lead was detected in the dirt and on the concrete brick walls of the open-dirt area in the basement. A lesser amount of lead was also found on the walls of the West storage room and laundry room. (The source of the lead is anecdotally thought to be from the use of the dirt-covered rooms as an indoor firing range up until possibly the 1990s.) It is important to note that no airborne lead was detected anywhere in the station.

Since the lead was found in soil and on walls and not in the air, we wouldn't expect that breathing the minute amount of lead that might get into the air would cause any problems. Any exposure risk would be limited to direct contact with the soil or walls where lead was found and accidental ingestion that might occur if hands were not washed before eating, drinking, smoking or other hand-to-mouth contact.

We are aware that the city has closed off the dirt area of the basement to routine access and is moving forward on remediating the lead contaminated areas.

We believe the surface lead exposure risk is small. Further, lead is not generally considered a cancer-causing agent. However, in order to allay any concerns about current exposure to lead, we are recommending that a blood lead level test be offered as an option to current or former members of Station 31. The blood lead level test is a simple blood test that measures how much lead is present in the bloodstream. These tests will be available at no cost at the North Public Health Center of the Seattle/King County Health Department (see attached flyer for information).

Pesticides

Three organochlorine pesticides were detected in the investigation. The dirt at the base of the hose tower contained low concentrations of the insecticide DDT. Low concentrations of

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chlordane and heptachlor epoxide were found in the soil in the planter area along the west exterior wall of the station and in the lawn area under the tree to the east of the station. The use of these pesticides likely occurred in the past by firefighters doing routine landscaping or minor insect control work, or by city-hired pest control operators.

Although DDT has a notorious reputation, this is principally earned from the impact of DDT on the environment rather than due to direct short-term or long-term human health effects. Its short-term health effects are limited and the threat of any long-term health effects has not been borne out by most studies to date. The other two pesticides found outside do have some short- and long-term effects of concern. However, the potential for exposure seems quite limited.

Based on the available data, other than the optional blood lead level test, there is no reason to recommend that current or former members of Station 31 undertake any medical screening above and beyond what is recommended for the general population. For information about effective medical screening tests, see the attached document. The document also contains information about the general signs and symptoms of cancer, if this is of concern to you. If you are experiencing any of these symptoms, it is important to contact your doctor.

While the results of the industrial hygiene study are reassuring, the results only help us understand current exposure risk. We will look to the epidemiological study findings to inform us about any past exposure risk. As more information becomes available, we will communicate with you further.

Thank you for your attention.

Sincerely,

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